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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT</b>	Application Number	10/017,717
	Filing Date	December 14, 2001
	First Named Inventor	Guy MILLER
	Art Unit	1614
	Examiner Name	P. Spivack
	Attorney Docket Number	346392001500

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

This request is being made at the request of Galileo Pharmaceuticals, Inc.

#### CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ Customer Number

OR

☒ Firm or Individual Name Carol Stratford (Swiss Law Group LLC)

Address Building 3, Palo Alto Square, 3000 El Camino Real, Suite 100  
City Palo Alto State California Zip 94306  
Country United States of America  
Telephone Fax

- ☒ This request is made on behalf of myself and  
☒ all the attorneys/agents of record.  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☐ the attorneys/agents associated with Customer Number

This request is enclosed in triplicate (including any attachments).

Name Debra J. Glaister  
Signature [Signature] Registration No. 33,888  
Date 12/9/03

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 12/9/03 Signature: [Signature] (Thao T. Pham)

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